

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

ELIZABETH SANCHEZ CORDERO,

Plaintiff,

-against-

POLICE DEPARTMENT, *Human Resources
Division*,

Defendant.

1:25-CV-5605 (LTS)

ORDER DIRECTING SIGNATURE

LAURA TAYLOR SWAIN, Chief United States District Judge:

Plaintiff brings this action *pro se*. The in forma pauperis application that Plaintiff submitted is unsigned. Rule 11(a) of the Federal Rules of Civil Procedure provides that “[e]very pleading, written motion, and other paper must be signed . . . by a party personally if the party is unrepresented.” Fed. R. Civ. P. 11(a); *see Becker v. Montgomery*, 532 U.S. 757, 764 (2001) (interpreting Rule 11(a) to require, “as it did in John Hancock’s day, a name handwritten (or a mark handplaced)”).

Plaintiff is directed to sign and submit the attached the attached "Plaintiff's Certification and Warnings" within 30 days of the date of this order. No summons or answer shall issue at this time. If Plaintiff complies with this order, the case shall be processed in accordance with the procedures of the Clerk’s Office. If Plaintiff fails to comply with this order within the time allowed, the action will be dismissed without prejudice.

The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would not be taken in good faith, and therefore *in forma pauperis* status is denied for the purpose of an appeal. *Cf. Coppedge v. United States*, 369 U.S. 438, 444–45 (1962) (holding that appellant

demonstrates good faith when seeking review of a nonfrivolous issue).

SO ORDERED.

Dated: July 14, 2025
New York, New York

/s/ Laura Taylor Swain

LAURA TAYLOR SWAIN
Chief United States District Judge

- | | | |
|---|---|--|
| (c) Pension, annuity, or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (d) Disability or worker's compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (e) Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (f) Any other public benefits (unemployment, social security, food stamps, veteran's, etc.) | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| (g) Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

If you answered "No" to all of the questions above, explain how you are paying your expenses:

4. How much money do you have in cash or in a checking, savings, or inmate account? **NO**

5. Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:

NO

6. Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of the monthly expense:

Medical Bill 1002 - Amount 5.000. Credit car Bill, over 215.000. Rent paym. 28.000. Car loan over 28.000. Gas Bill 1002. Water Bill 13.710. Electric Bill 6.720. Phone Bill 13.710. Food 50.000.00 thousand. Late Payment. To Car loan. Electric Bill 6.720.

7. List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18):

A. B. B.

8. Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable: **700000 Money to National Bank. To water Bill, Com Edison. National Grid, Credit card, bond by family friends. Medical Bill. Phone Bill, Verizon Pro.**

Declaration: I declare under penalty of perjury that the above information is true. I understand that a false statement may result in a dismissal of my claims.

07-07-2025
Dated

Signature

Sanchez Cecero Elizabeth
Name (Last, First, MI)

Prison Identification # (if incarcerated)

25923 Francis Lewis Blvd.
Address City

N.Y. Rosedale 11422
State Zip Code

516-760-7220
Telephone Number

Elizabeth5936@gmail.com
E-mail Address (if available)